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## **Title page**

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### **Author contributions**

MG, SS and PN conceived and designed the study. MG and PN carried out data collection, creating the 'brown envelopes', running the focus groups and completing data analysis and interpretation. MG drafted the article and LC, SS and PN edited multiple versions to achieve the final version. All authors gave final approval of the final version to be published. All are in agreement to be accountable for all aspects of the work in ensuring that questions

related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

**Funding for work described**

None

**Details of any potential conflict of interest**

None

**Ethical approval**

Approval was granted by the University of Bristol Health Sciences Student Research Ethics Committee prior to commencing the study (FREC No. 75041).

**Title:** A 'brown envelope' intervention for digital professionalism training.

**(1) What problem was addressed?**

Reports are emerging that since the publication of regulating bodies guidance on using social media, there have been small, but rising numbers of Fitness to Practise cases made against healthcare professionals relating to its use. Digital professionalism training is increasingly recognised as an important part of the undergraduate curriculum, but more work is required to determine the most effective way to do this. In our Faculty, initial pedagogic efforts to address this issue included invited lectures from guest speakers on professionalism and ethics. However, these received poor student feedback, failing to incite a level of reflection about online activities which corresponded to little to no change in their online behaviours (e.g. posts and security settings).

**(2) What was tried?**

A previous study<sup>1</sup> demonstrated that by incorporating student-submitted social media examples into professionalism training heightened interest and engagement, which led to the development of our 'brown envelope' intervention. Year 2 dental students (n=68) receive a seminar as an introduction to professionalism, during which time 30-minutes is spent specifically on digital professionalism. This includes a talk from a member of Faculty, reviewing current social media guidelines, examples of real-life social media faux-pas made by healthcare professionals and online risk management techniques. Each student also receives a personal concealed 'brown envelope' containing a one-page investigative summary of their publicly available online profile. Two Faculty members conducted online Facebook searches of each registered student, using their name. Examples of inappropriate

or unprofessional online behaviour were recorded. Data collection is minimally resource intensive but still requires time and effort, in addition to minor administrative costs for paper, printing and envelopes.

### **(3) What lessons were learned?**

Eight weeks following the intervention, students were invited to participate in focus groups to examine the impact of the 'brown envelope' using the Theory of Planned Behaviour as an interpretive framework for behaviour change. The intervention did appear to generate long-term actionable change in students' online behaviour, reported as alterations in privacy settings or through restricting access to their own 'friends lists'. Despite being aware of the 'brown envelope' from previous year groups, students were surprised that their profiles were still accessible to both tutors and the general public.

Given its positive reception amongst students, we recommend the 'brown envelope' for use in undergraduate healthcare professional education, which could form part of a larger, more interactive training programme delivered at multiple time points. Incorporating a "Google" self-search into training could potentially offer the same effect, with even less preparation time. However, it may not create the surprise element induced by the knowledge that tutors have already accessed the information. Another criticism of the current training was a lack of content on the positive use of social media, which could be blended into the programme. Given resource limitations, only Facebook online profiles were reviewed, but as students informed us, the use of other platforms such as Instagram are becoming more popular and could be where most misuse is occurring. Going forward

therefore, we need to capture data on a wider range of platforms, to ensure intervention remains contemporary.

## **Reference**

- 1) Gomes, AW, Butera, G, Chretien, KC, Kind, T. The Development and Impact of a Social Media and Professionalism Course for Medical Students. *Teaching and Learning in Medicine*. 2017;29(3):296-303.